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**STRAUB & POKOTYLO**  
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Michael P. Straub	(Depositor's name)
<i>Michael P. Straub</i>	(Signature)
April 5, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/615,468	07/13/2000	Stefan Jones	ALCATEL-4 (NCBE-1535)	4913

TITLE OF INVENTION: DYNAMIC GENERATION OF VIDEO CONTENT FOR PRESENTATION BY A MEDIA SERVER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	04/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEMICCO, MATTHEW R	2611	725-143000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 <u>Michael P. Straub</u>
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Authorized Signature Michael P. StraubDate April 5, 2005Typed or printed name Michael P. StraubRegistration No. 36,941

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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

		Application Number	09/615,468
		Filing Date	July 13, 2000
		First Named Inventor	Stefan JONES
		Group Art Unit	2611
		Examiner Name	Matthew R. Demicco
Total Number of Pages in This Submission		Attorney Docket Number	Alcatel-4 (NCBE-1535)

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (Form PTOL-85B) <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Postcard Receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael P. Straub (Reg. No. 36,941)
Signature	
Date	April 5, 2005

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Typed or printed name	Michael P. Straub
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Date	April 5, 2005

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